FEC FORM 3X	REPORT OF AND DISBUF For Other Than An Aut	RSEMENTS	RECEIVED FEC MAIL CENTER 2020 OCT 22 PM 1: 16
1. NAME OF COMMITTEE (in full)	TYPE OF PRINT ¥	Example: If typing, type over the lines,	[12FE4M5]
	<u> </u>	S _i F ₁ ,S ₁ T ₁ E ₁ E ₁ L ₁ ,C ₁ O ₁	N ₁ S ₁ T ₁ R ₁ U ₁ C ₁ T ₁ I ₁ O ₁ N ₁ P ₁ A ₁ C ₁
ADDRESS (number and stree Check it different than previously reported. (ACC)	[S,U, I, T, E, , 2,0,0 [,C,H, I, C, A, G, O,		$T_{i}R_{i}E_{i}E_{i}T_{i}$
2. FEC IDENTIFICATION	3 0 5 3 3, 1	S THIS NEW REPORT (N) OR	STATE A ZIP CODE A
 4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: Aoril 15 Quarterly Reports: July 15 Duarterly Report July 15 Duarterly Report July 31 Year-End Report July 31 Mid-Ya Report (Non-éty Year Only) (M) Termination Re (TER) 	Heport C-Apr Due On: Ma Due On: Apr (C) 12-Day PRE-Election Report for the: ar (C) 30-Day POST-Election Report for the:	General (30G)	Sep 20 (M9) Dec 20 (M12) (Non-Election Year Orty) Oct 20 (M10) Jan 31 (YE) General (123) Runott (12F) Special (12S) in the State of Runott (30R) Special (30S)
		0 Ihrough 0 9 my knowledge and belief it is in	ie, correct and complete.
Type or Print Name of Trea. Signature of Treasurer	Dufe		Dete $\begin{bmatrix} 1 & 0 \\ 1 & 0 \end{bmatrix}$ $\begin{bmatrix} 0 & 0 \\ 1 & 5 \end{bmatrix}$ $\begin{bmatrix} 2 & 0 & 2 \\ 2 & 0 \end{bmatrix}$ $\begin{bmatrix} 0 & 2 \\ 1 & 0 \end{bmatrix}$ is Report to the penalties of 52 U.S.C. § 30109.
Office Usa Onty			FEC FORM 3X Rev. 05/2018

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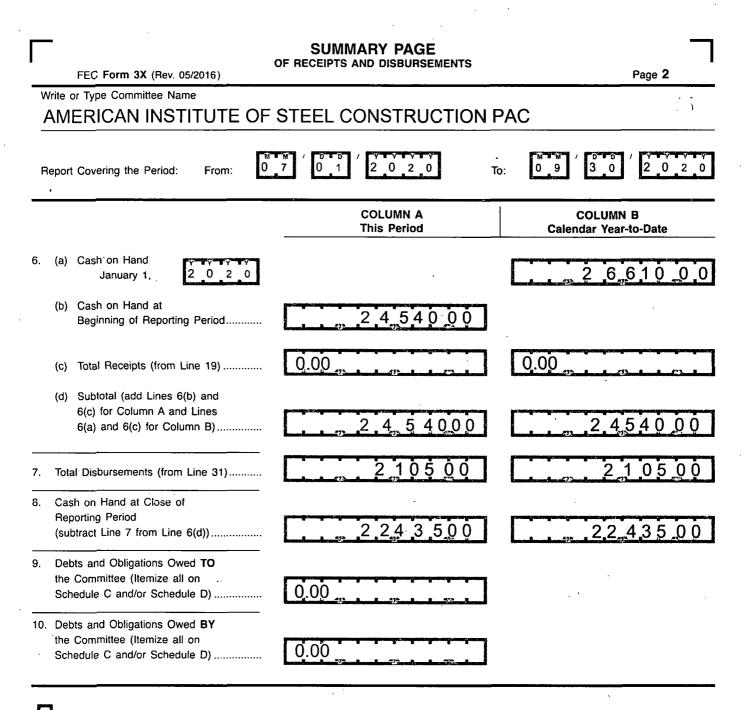
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This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission 1050 First Street, N.E. Washington, DC 20463

> Toll Free 800-424-9530 Local 202-694-1100

	FEC Form 3X (Rev. 05/2016)	of Receipts	Page 3
	Irite or Type Committee Name		·
/	AMERICAN INSTITUTE OF	STEEL CONSTRUCTION	PAC
R	eport Covering the Period: From:		
	I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11.	Contributions (other than loans) From: (a) Individuals/Persons Other		
	Than Political Committees	มี มากระวาราสาวาราสาวาราวราวราวราวราวราวราวราวราวราวราวราวร	รี่ระคมกร้องสารหนึ่งหมายไปหนุ่งเรืองหมายในหมายใหม่ความสาวไหวเลยเป็นหลายให้การเรืองกระเป็นหลาย เ
	(i) Itemized (use Schedule A)	0.00	0.00
	(ii) Unitemized	0.00	0.00
	(iii) TOTAL (add	0.00	0.00
	Lines 11(a)(i) and (ii)▶	Beendonsedweed222000 daweed22000 dawed20000 daweed20000 daweed20000 daweed20000 daweed20000 daweed20000 daweed	
	(b) Political Party Committees	0.00	
	(c) Other Political Committees (such as PACs)	0.00	0.00
	(d) Total Contributions (add Lines	Barran Barran Charles (1) Annual Charles (1) Annual (1) A	Karanan dana ana di sangat Anangat Menunada mening Laka na Panganan Panganan Panganan dan melanggan
,	11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	0.00	0.00
12.	Transfers From Affiliated/Other	land and the second	lannastanan ganna gannayan mganaganan ganna g
	Party Committees	0.00	0.00
13.	All Loans Received	0.00	0.00
14.	Loan Repayments Received	0.00	0.00
15.	Offsets To Operating Expenditures (Refunds, Rebates, etc.)	มีการหมัดแหร่มีมายรับได้มายมีการหมัดการได้การมีใจการประสาทีมีการได้การได้	Beerer Bernnik muli fören flemme forst sär i ärna drems förstadet för att fören som som som som som som som so Till som
	(Carry Totals to Line 37, page 5)	0.00	0.00
16.	Refunds of Contributions Made	General and the second	have the ender of the short of
	to Federal Candidates and Other Political Committees	0.00	0.00
17.	Other Federal Receipts	kan ta at an	¹ . Constant of the second second Second second
18.	(Dividends, Interest, etc.) Transfers from Non-Federal and Levin Funds	s 0.00	0.00
	(a) Non-Federal Account	R unnet an ander an a nder	0.00 h <u>mañ al anter far dan dan dan dan dan</u>
	(from Schedule H3)	0.00.	
	(b) Levin Funds (from Schedule H5)	0.00	0.00 northered land in the state of the stat
	(c) Total Transfers (add 18(a) and 18(b)).	0.00.	0.00
19.	Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))▶	0.00	0.00
20	Total Federal Receipts	Construction and Const Construction and Construction a	namanta Carantat Ananta (Anopumbanan generala) situ ng Japan Angara (Baranta) situ ng Sanata
20.	(subtract Line 18(c) from Line 19)▶	0.00	0.00

NONON-HOL NON DATE ON TON TONO

DETAILED SUMMARY PAGE

of Disbursements FEC Form 3X (Rev. 05/2016) Page 4 COLUMN A COLUMN B **II. Disbursements Total This Period Calendar Year-to-Date** 21. Operating Expenditures: (a) Allocated Federal/Non-Federal Activity (from Schedule H4) 0.00 0.00 (i) Federal Share 0.00 Ö.Ö0 (ii) Non-Federal Share..... (b) Other Federal Operating 105_0 Expenditures Bank Fees 0.00 0 0.00 7500 (c) Total Operating Expenditures 0 00 0 5 0 0 0.00 500 (add 21(a)(i), (a)(ii), and (b)) 22. Transfers to Affiliated/Other Party Committees..... 0.000.00 Contributions to Federal Candidates/Committees and Other Political Committees...... 0.00 0.0.000 24. Independent Expenditures (use Schedule E)..... Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F)..... 0.00 0.00 0.000.000.00 26. Loan Repayments Made..... 0.000.00 Loans Made..... 0.00 (a) Individuals/Persons Other Than Political Committees 0.000.000.00(b) Political Party Committees 0.00 (c) Other Political Committees 0.00(such as PACs)..... 0.00 Total Contribution Refunds (d) (add Lines 28(a), (b), and (c))...... **0.00** 0.0029. Other Disbursements (Including 0.00 Non-Federal Donations)..... 0.00 30. Federal Election Activity (52 U.S.C. § 30101(20)) (a) Allocated Federal Election Activity (from Schedule H6) (i) Federal Share 0.000.00 (ii) "Levin" Share..... 0.00 0.00(b) Federal Election Activity Paid Entirely With Federal Funds 0.00 0.00 (c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) 0.000.0031. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)).. 2.10500 5 00 4 0 0 0 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)..... 200000 Õ. Õ Õ 4000.00

23.

25.

27.

28.

DETAILED SUMMARY PAGE of Disbursements

COLUMN A

Total This Period

FEC Form 3X (Rev. 05/2016)

III. Net Contributions/ Operating Expenditures

- Total Contributions (other than loans) (from Line 11(d), page 3)
- (subtract Line 34 from Line 33)
- 36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶
- 37. Offsets to Operating Expenditures (from Line 15, page 3)......38. Net Operating Expenditures
- (subtract Line 37 from Line 36)

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0.00	200000
0.00	,105,00
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0.00 "	10500

0.00	<u>,4000.00</u>
0.00	5 <u>)</u> ≥
0.00	400000
0.00	<u>, 175,00</u>
0.00	
0.00	17500

COLUMN B

Calendar Year-to-Date

Page 5

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s)	FOR LINE NUMBER: PAGE OF (check only one)		
		for each category of the Detailed Summary Page	$\begin{array}{ c c c c c c c c } \hline X & 11a & 11b & 11c & 12 \\ \hline 13 & 14 & 15 & 16 & 17 \\ \hline \end{array}$		
Any information copied from such Reports a or for commercial purposes, other than using	nd Statements may g the name and ad	v not be sold or used by any p dress of any political committee	erson for the purpose of soliciting contributions e to solicit contributions from such committee.		
NAME OF COMMITTEE (IN Full)					
Full Name of Individual (Last, First, Middl	e Initial) or Full Org	ganization Name	Date of Receipt		
Mailing Address					
City	State	Zip Code	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C				
Name of Employer (for Individual)	Occut	pation (for Individual)	Memo Item		
Receipt For: Primary General Other (specify) ▼	Aggregate Y	/ear-to-Date ▼]		
Full Name of Individual (Last, First, Middl	e Initial) or Full Org	ganization Name	Date of Receipt		
Mailing Address					
City	State	Zip Code	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C				
Name of Employer (for Individual)	Occu	pation (for Individual)	Memo Item		
Receipt For:	Aggregate Y	/ear-to-Date ▼			
Other (specify) V		<u> </u>]		
Full Name of Individual (Last, First, Middl	e Initial) or Full Org	ganization Name	Date of Receipt		
Mailing Address					
City	State	Zip Code	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C				
Name of Employer (for Individual)	Occur	pation (for Individual)	Memo Item		
Receipt For: Primary General Other (specify)	Aggregate Y	fear-to-Date ▼]		
SUBTOTAL of Receipts This Page (optiona		••••••	0000		
TOTAL. This Period (last page this line num	nber only)		00.00		

FEC Schedule A (Form 3X) Rev. 05/2016

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SCHEDULE B (FEC Form 3X) PAGE OF FOR LINE NUMBER: Use separate schedule(s) **ITEMIZED DISBURSEMENTS** (check only one) for each category of the 21b 27 22 23 26 **Detailed Summary Page** 28a 28b 28c 29 30ъ Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) AISC PAC Full Name (Last, First, Middle Initial) Α. Date of Disbursement James E. Clyburn 0 0 2 0 Mailing Address 7 7 2 499 South Capitol Street, SW City Zip Code State **FEC Identification Number** Washington DC 20003 Purpose of Disbursement 0 2 5 0 5 5 6 2 С General Fundraising Candidate Name Amount of Each Disbursement this Period Category/ James E. Clyburn Туре Office Sought: 1 0 0 0 0 0 Disbursement For: x House General Senate Primary President Other (specify) V Memo Item District: State: Full Name (Last, First, Middle Initial)

В.	Peter Defazio				Date of Disbursement
	Mailing Address 3321 SE 20th Avenue C/O C&E Systems				
	City Portland, OR Purpose of Disbursement General Fundraising Candidate Name	State OR	Zip Code 97202		FEC Identification Number
	Peter Defazio	sement For: Primary Other (spec	General (General Cify)	Category/ Type	Amount of Each Disbursement this Period
C.	Full Name (Last, First, Middle Initial) Mailing Address				Date of Disbursement
	City Purpose of Disbursement	State	Zip Code		FEC Identification Number
	Candidate Name Office Sought: House Disbur	sement For:		Category/ Type	Amount of Each Disbursement this Period
	State: District:	Primary Other (spec	General cify) ▼		Memo Item
\vdash	UBTOTAL of Disbursements This Page (optiona OTAL This Period (last page this line number of				

FEC Schedule B (Form 3X) Rev. 05/2016

SCHEDULE C (FEC Form 3X)

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INS			Use separate schedu for each category of t Detailed Summary Pa	lhe
ME OF COMMITTEE (In F	E OF COMMITTEE (In Full)			
LOAN SOURCE Full Na	me (Last, First, Mi	ddle Initial)	[] Memo Ite	
Mailing Address				Primary General Other (specify) ▼
City		State	ZIP Code	
Original Amount of Loan Cumulative Payment To D		ment To Date B	alance Outstanding at Close of This Perio	
TERMS Date Incur	red		ate Due Interest R	ale Secured:
		1.5 ° • 1.5 / D • O		% (apr) Yes N
List All Endorsers or Gu 1. Full Name (Last, First,	the state of the second st	ở Loan Source	Name of Employer	
Mailing Address			Occupation	
City	State	ZIP Code	Amount Guaranteed Outstanding:	
2. Full Name (Last, First,	Middle Initial)		Name of Employer	
Mailing Address			Occupation	
City	State	ZIP Code	Amount Guaranteed Outstanding:	
3. Full Name (Last, First, 2	Middle Initial)		Name of Employer	
Mailing Address			Occupation	
City	State	ZIP Code	Amount Guaranteed Outstanding:	
4. Full Name (Last, First, Middle Initial)			Name of Employer	
Mailing Address	<u> </u>		Occupation	· · · · · · · · · · · · · · · · · · ·
City	State	ZIP Code	Amount Guaranteed Outstanding:	
UBTOTALS This Period Th	nis Page (optional)		····· F	
OTALS This Period (last pa			h	
arry outstanding balance	only to LINE 3 Sel	nedule D for this	line if no Schedule D. correct	prward to appropriate line of Summary

FEC Schedule C (Form 3X) Rev. 05/2016

SCHEDULE C-1 (FEC Form 3X) LOANS AND LINES OF CREDIT FROM LENDING INSTITUTIONS

Federal Election Commission, Washington, D.C. 20463

Supplementary for . Information found on of Schedule C Page

NAME OF COMMITTEE (In Full)			FEC	IDENTIFICATION NUMBER
			C	
LENDING INSTITUTION (LENDER)	· · · · · · · · · · · · · · · · · · ·	Amount of Loan		Interest Rate (APR)
Full Name				
				%
Mailing Address				
		Date Incurred or Establishe	ed	
City Sta	ate Zip Code	Date Due	M	/ Ď T Ď / Ď T Ý T Ý T Ý T Ý T Ý
A. Has loan been restructured?	No Yes	If yes, date originally incur	red	/
B. If line of credit,		Total		
Amount of this Draw:	and the state of the	Outstanding Balance:		
	sers and guarantors r	nust be reported on Schedule C		
D. Are any of the following pledge property, goods, negotiable inst	ed as collateral for the truments, certificates	e loan: real estate, personal of deposit, chattel papers.	What is the	value of this collateral?
stocks, accounts receivable, ca				
No Yes If yes, s	specify:			
			Does the le	nder have a perfected security
E. Are any future contributions or	future receipts of inte	erest income, pledged as		estimated value?
collateral for the loan?	Yes If yes,	specify:		
			·	<u></u>
A depository account must be to 11 CFR 100.82(e)(2) and 10	established pursuant 00.142(e)(2).	Location of account:		
Date account establishe	ed:	Address:		
	······································	City, State, Zip:		
F. If neither of the types of collate the loan amount, state the basi	ral described above v is upon which this loa	vas pledged for this loan, or if th In was made and the basis on	ne amount plede which it assures	ged does not equal or exceed s repayment.
G. COMMITTEE TREASURER			DATE	· · · · · · · · · · · · · · · · · · ·
Typed Name Signature				
H. Attach a signed copy of the lo	an agreement.		l	
I. TO BE SIGNED BY THE LEN	DING INSTITUTION: ion's knowledge, the	terms of the loan and other info	ormation regardi	ng the extension of the loan
II. The loan was made on te similar extensions of cred III. This institution is aware o	erms and conditions (it to other borrowers of the requirement tha	including interest rate) no more of comparable credit worthiness t a loan must be made on a ba	Isis which assu	
AUTHORIZED REPRESENTATIVE	ments set forth at 11	CFR 100.82 and 100.142 in ma	aking this loan.	
Typed Name				
Signature		lītle		

FEC Schedule C-1 (Form 3X) Rev. 05/2016

CHEDULE D (FEC Form 3X) EBTS AND OBLIGATIONS cluding Loans			(Use separate schedule(s) for each numbered line)	PAGE OF FOR LINE NUMBER: (check only one) 9 10
AME OF COMMITTEE (In Full)				
A. Full Name (Last, First, Middle Initial) of Debto	r or Creditor		Nature of D	Debt (Purpose):
Mailing Address				
City	State	Zip Code		
Outstanding Balance Beginning This Period				
Amount Incurred This Period	Pa	yment This Period		ng Balance at Close of This Per
B. Full Name (Last, First, Middle Initial) of Debtor	or Creditor		Nature of D	Debt (Purpose):
Mailing Address				
City	State	Zip Code		
Amount Incurred This Period	Pa	yment This Period	Outstandi	ng Balance at Close of This Pe
C. Full Name (Last, First, Middle Initial) of Debto	or or Creditor		Nature of D	Debt (Purpose):
Mailing Address				
City	State	Zip Code		
Outstanding Balance Beginning This Period	Pa	yment This Period	Outstandi	ng Balance at Close of This Pe
SUBTOTALS This Period This Page (optional)				
) TOTALS This Period (last page this line number	only)			
TOTAL OUTSTANDING LOANS from Schedule	C (last page o	only)		
ADD 2) and 3) and carry forward to appropriate	line of Summ	ary Page (last page	only) ►	

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SCHEDULE E (FEC Form 3X)

TEMIZED INDEPENDENT EXPENDITURE	S		PAGE OF FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)			FEC IDENTIFICATION NUMBER V
Check if 24-hour report 48-hour report	New r	eport Amends report	
Full Name of Payee		🗌 Memo II	Date of Public Distribution/Dissemination
Mailing Address			Amount
City	State	Zip Code	
Purpose of Expenditure		Category/ Type	Date of Disbursement or Obligation
Name of Federal Candidate:		Support Oppose	Office Sought: House District:
Calendar Year-To-Date Per Election for Office Sought	L-(1)(1)	3-4-4	Disbursement For: Primary General Other (specify) ►
Full Name of Payee		C Memo II	Date of Public Distribution/Dissemination
Mailing Address		······	Amount
City	State	Zip Code	
Purpose of Expenditure		Category/ Type	Date of Disbursement or Obligation
Name of Federal Candidate:		Support Oppose	Office Sought: House District:
Calendar Year-To-Date Per Election for Office Sought	1		Disbursement For:
(a) SUBTOTAL of Itemized Independent Expenditur	es		
(a) SUBTOTAL of Uniternized Independent Expendit	itures		
(a) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the indeper with, or at the request or suggestion of, any cand party committee) any political party committee or i	idate or authoriz		
		Date	M M / D O / Y Y Y Y Y
Signature			EEC Schedule E (Form 3Y) Bey 0/20

SCHEDULE F (FEC Form 3X) ITEMIZED COORDINATED PARTY EXPENDITURES MADE BY POLITICAL PARTY COMMITTEES OR DESIGNATED AGENT(S) ON BEHALF OF CANDIDATES FOR FEDERAL OFFICE

AME OF COMMITTEE (in Full) as your committee been designated to make cordinated expenditures by a political party committee? YES NO YES NO YES NO YeS, name the designating committee: Italing Address City State City State Address Date City State Name of Federal Candidate Supported Office Sought: House State: Presidential Date Full Name (Last, First, Middle Initial) of Each Payee Memo Item Purpose of Expenditure Amount Presidential Date Total State District: Aggregate General Election State Expenditure for this Candidate Imitial) of Each Payee Memo Item Purpose of Expenditure Category/ Type Malling Address Date City State Full Name (Last, First, Middle Initial) of Each Payee Memo Item Purpose of Expenditure Category/ Type City State District: Name of Federal Candidate Imital) of Each Payee
productive by a political party committee? Mailing Address City State Full Name (Last, First, Middle Initial) of Each Payee Memo Item Purpose of Expenditure Category/ Type City State Presidential Amount Presidential Purpose of Expenditure Full Name (Last, First, Middle Initial) of Each Payee Memo Item Purpose of Federal Candidate Supported Office Sought: House State: Date City State Date Presidential District: Amount Aggregate General Electon Presidential District: Puti Name (Last, First, Middle Initial) of Each
productive by a political party committee? YES NO YES NO YES, name the designating committee: Mailing Address City State ZIP Code Full Name (Last, First, Middle Initial) of Each Payee Memo Item Purpose of Expenditure City State Zip Code City State Zip Code City State Zip Code Name of Federal Candidate Supported Office Sought: House State: Providential Persidential Amount Amount Mailing Address City State Zip Code Full Name (Last, First, Middle Initial) of Each Payee Memo Item Purpose of Expenditure Mailing Address City State Date City State District: Amount Mailing Address Office Sought: House State: Date Rependiture for this Candidate > State District: Purpose of Expenditure Rame of Federal Candidate > State District: Purpose of Expenditure Rame of Federal Candidate > State </td
YES NO YES, name the designating committee: Mailing Address Ciy State ZIP Code Full Name (Last, First, Middle Initial) of Each Payee Memo Item Purpose of Expenditure City State Zip Code City State Zip Code City State Zip Code City State Zip Code Name of Federal Candidate Supported Office Sought: House Senate District: Amount Presidential District: Amount Full Name (Last, First, Middle Initial) of Each Payee Memo Item Purpose of Expenditure Full Name (Last, First, Middle Initial) of Each Payee Memo Item Purpose of Expenditure City State Zip Code State: Name of Federal Candidate Supported Office Sought: House State: Angeregate General Election Erst, First, Middle Initial) of Each Payee Memo Item Purpose of Expenditure Full Name (Last, First, Middle Initial) of Each Payee Memo Item Purpose of Expenditure Category/ Category/ Type Full Name (Last, First, Middle Initial) of Each Payee
YES, name the designating committee: Mailing Address City State ZIP Code Full Name (Last, First, Middle Initial) of Each Payee Memo Item Purpose of Expenditure Mailing Address Date City Date City State Zip Code Date City State Date City Date Name of Federal Candidate Supported Office Sought: House State: Amount Aggregate General Election City State Date City Full Name (Last, First, Middle Initial) of Each Payee Memo Item Purpose of Expenditure Category/ Type City State Zip Code Memo Item Purpose of Expenditure Category/ Type City State Zip Code Date City Category/ Type Category/ Type City State Zip Code Memo Item Purpose of Expenditure Category/ Type Full Name (Last, First, Middle Initial) of Each Payee Memo Item Purpose of Expenditure Category/ Type City State Zip Code Memo Item Purpose of Expenditure Category
City State ZIP Code Full Name (Last, First, Middle Initial) of Each Payee Memo Item Purpose of Expenditure Mailing Address City State Zip Code City State Zip Code Category/ Type Name of Faderal Candidate Supported Office Sought: House State: Amount Aggregate General Election Expenditure for this Candidate > Category/ Type Presidential Purpose of Expenditure Full Name (Last, First, Middle Initial) of Each Payee Memo Item Purpose of Expenditure Category/ Type Mailing Address Date State: Amount Category/ Type City State Zip Code State: Amount Aggregate General Election Expenditure for this Candidate > Each Payee Date State: Amount Full Name (Last, First, Middle Initial) of Each Payee Memo Item Purpose of Expenditure Category/ Type Category/ Type Full Name (Last, First, Middle Initial) of Each Payee Memo Item Purpose of Expenditure Category/ Category/ Type Category/ Type Category/ Type Full Name (Last, First, Middle Initial) of Each Payee Memo Item Pur
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Mailing Address Category/ Category/ Type City State Zip Code Name of Federal Candidate Supported Office Sought: House Senate State: Amount Aggregate General Election Expenditure for this Candidate P Image: State: Amount Image: State: Category/ Type Full Name (Last, First, Middle Initial) of Each Payee Image: Memo Item Purpose of Expenditure Image: State: Category/ Type City State Zip Code State: Date Image: State: Amount Aggregate General Election Expenditure for this Candidate P Image: State: Date Image: State: Amount City State Zip Code Image: State: Date Image: State: Image: St
Mailing Address Category/ Category/ Type City State Zip Code Name of Federal Candidate Supported Office Sought: House Senate State: Amount Aggregate General Election Expenditure for this Candidate P Image: State: Amount Image: State: Category/ Type Full Name (Last, First, Middle Initial) of Each Payee Image: Memo Item Purpose of Expenditure Image: State: Category/ Type City State Zip Code State: Date Image: State: Amount Aggregate General Election Expenditure for this Candidate P Image: State: Date Image: State: Amount City State Zip Code Image: State: Date Image: State: Image: St
Mailing Address Type City State Zip Code Name of Federal Candidate Supported Office Sought: House Senate District: District: Presidential District: Amount Full Name (Last, First, Middle Initial) of Each Payee Memo Item Purpose of Expenditure City State Zip Code Name of Federal Candidate ▶
Mailing Address Type City State Zip Code Name of Federal Candidate Supported Office Sought: House Senate District: District: Presidential District: Amount Full Name (Last, First, Middle Initial) of Each Payee Memo Item Purpose of Expenditure City State Zip Code Name of Federal Candidate ▶
City State Zip Code Image: Code descent of the state of the
Name of Federal Candidate Supported Office Sought: House State:
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Name of Federal Candidate Supported Office Sought: House State: Senate District:
Aggregate General Election
Aggregate General Election
Aggregate General Election
Expenditure for this Candidate >
SUBTOTAL of Expenditures This Page (optional)
FOTAL This Period (last page this line number only)

PAGE

OF

SCHEDULE H1 (FEC Form 3X)

METHOD OF ALLOCATION FOR:

- ALLOCATED FEDERAL AND NONFEDERAL ADMINISTRATIVE, GENERIC VOTER DRIVE AND EXEMPT ACTIVITY COSTS
- ALLOCATED FEDERAL AND LEVIN FUNDS FEDERAL ELECTION ACTIVITY EXPENSES (State, District and Local Party Committees Only)
- ALLOCATED PUBLIC COMMUNICATIONS THAT REFER TO ANY POLITICAL PARTY (BUT NOT A CANDIDATE) (Separate Segregated Funds And Nonconnected Committees Only)

NAME OF COMMITTEE (In Full)

USE ONLY ONE SECTION, A or B

A. State and Local Party Committees

Fixed Percentage (select one)

_____ Presidential-Only Election Year (28% Federal)

_____ Presidential and Senate Election Year (36% Federal)

_____ Senate-Only Election Year (21% Federal)

_____ Non-Presidential and Non-Senate Election Year (15% Federal)

B. Separate Segregated Funds and Nonconnected Committees

Indicate ratio below	
Federal	······ %
Nonfederal	······
This ratio applies to (check all that apply):	• .
Administrative Generic Voter Drive	Public Communications Referencing Party Only

SCHEDULE H2 (FEC Form 3X) Α

ALLOCATION RATIOS		PAGE OF
NAME OF COMMITTEE (In Full)		
	······	
RATIOS FOR ALLOCABLE FUNDRAISING EVENTS AND DIRECT CANDIDATE S ACTIVITIES APPEARING ON THIS REPORT.	UPPORT	
Methods of allocation:		· .
I. FUNDRAISING activities are allocated using the "funds received method" expenses must equal the federal proportion of monies raised.	where the federal pro	oportion of
II. Shared DIRECT CANDIDATE SUPPORT activities are allocated according where the federal proportion of disbursements is based on the benefit de tivity. For PACs Only: Direct candidate support includes public communic federal and nonfederal candidates, regardless of whether there is a refere are allocated using a time/space method.	rived by federal cand ations or voter drives	dates from the ac- that refer to both
ACTIVITY OR EVENT IDENTIFIER	FEDERAL %	NONFEDERAL %
CHECK IF THE RATIO IS:	<u> </u>	%
New Revised Same as Previously Reported		
ACTIVITY OR EVENT IDENTIFIER	FEDERAL %	NONFEDERAL %
ACTIVITY IS:		
CHECK IF THE RATIO IS:	%	%
New Revised Same as Previously Reported		
ACTIVITY OR EVENT IDENTIFIER		
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Fundraising Direct Candidate Support	%	%
CHECK IF THE RATIO IS:	and a surface of the	hereiten fin die andered
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ACTIVITY OR EVENT IDENTIFIER	FEDERAL %	NONFEDERAL %
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ACTIVITY OR EVENT IDENTIFIER		
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Fundraising Direct Candidate Support	%	%
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SCHEDULE H3 (FEC Form 3X) TRANSFERS FROM NONFEDERAL ACCOUNTS FOR ALLOCATED FEDERAL / NONFEDERAL ACTIVITY

PAGE OF

FOR LINE 18a OF FORM 3X

NAM	E OF ACCOUNT		TOTAL AMOUNT TRANSFERRED
BRE	AKDOWN OF TRANSFER RECEIVE	 ED	
i)	Total Administrative		
ii)	Generic Voter Drive		
lii)	Exempt Activities	·	
iv)	Direct Fundraising (List Activity or E	Event Identifier)	
	a)		
	b)		
	c) Total Amount Transferred For Direct	ct Fundraising	
v)	Direct Candidate Support (List Activ		Researchman all an sig Timenikar an Instan Zimenikar an Instan Zimenikar an Zimenika
	a)		
	b)	Bassard Samera (analysis and an an	
		ct Candidate Support	
vi)	Public Communications Referring	Only to Party (Made by PAC)	·····
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TAL	This Period (Generic Voter Drive)		annan an ann an an ann an ann an ann an
TAL	This Period (Exempt Activities)		
TAL	This Period (Direct Fundraising)		A
TAL	This Period (Direct Candidate Suppor	t)	
TAL	This Period (Public Communications I	Referring Only to Party)	

FEC Schedule H3 (Form 3X) Rev. 05/2016

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

		·			
Α.	Full Name (Last, First, Middle Initial)			🗌 Memo Item	Allocated Activity or Event:
	Mailing Address	·			Administrative Fundraising Exempt
	· · · · · · · · · · · · · · · · · · ·				
	City	State	Zip Code		Public Comm (ref to party only) by PAC
	Purpose of Disbursement:			[Allocated Activity or Event Year-To-Date
	Activity or Event Identifier:				
				Category/ Type	Date
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В .	Full Name (Last, First, Middle Initial)			Memo Item	Allocated Activity or Event:
-	Mailing Address				Administrative Fundraising Exempt
					Voter Drive Direct Candidate Support
	City	State	Zip Code		Public Comm (ref to party only) by PAC
	Purpose of Disbursement:	_ L		<u>.</u>	Allocated Activity or Event Year-To-Date
	·				
	Activity or Event Identifier:				
	•			Category/ Type	Date
	FEDERAL SHARE	+ N	ONFEDERAL	SHARE	= TOTAL AMOUNT
Ē.	Full Name (Last, First, Middle Initial)			Memo Item	Allocated Activity or Event:
					Administrative Fundraising Exempt
	Mailing Address				Voter Drive Direct Candidate Support
	City	State	Zip Code		Public Comm (ref to party only) by PAC
	Purpose of Disbursement:		l		Allocated Activity or Event Year-To-Date
	Activity or Event Identifier:			house and	
				Category/ Type	Date
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FEC Schedule H4 (Form 3X) Rev. 05/2016

OF

PAGE

FOR LINE 21a OF FORM 3X

SCHEDULE H5 (FEC Form 3X)

TRANSFERS OF LEVIN FUNDS RECEIVED FOR ALLOCATED FEDERAL ELECTION ACTIVITY (To be used by State, District and Local Party Committees O

ME OF COMMITTEE (In Full)	· · · · ·
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ii) Voter ID	
Total Amount Transferred for Voter ID	
iii) GOTV	GOTV
Total Amount Transferred for GOTV	
Kanada br>GEN	ERIC CAMPAIGN ACTIVITY
iv) Generic Campaign Activity Total Amount Transferred for Generic Campaign Activity	ֈՠՠՠֈՠՠ֎ՠՠՠֈՠՠ֍ՠՠ֎ՠՠ֎ՠՠ֎ՠ֎ՠ ֎
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BREAKDOWN OF THIS TRANSFER	
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Total Amount Transferred for Voter ID	
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iii) GOTV	the million for the second second
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Total Amount Transferred for Generic Campaign Activity	
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TOTAL This Period (Generic Campaign Activity)	The American Street Stree
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TOTAL This Period (Total Amount of Transfers Received)	

FEC Schedule H5 (Form 3X) Rev. 05/2016

SCHEDULE H6 (FEC Form 3X) DISBURSEMENTS OF FEDERAL AND LEVIN FUNDS FOR ALLOCATED FEDERAL ELECTION ACTIVITY (To be used by State, District and Local Party Committees Onl

PAGE OF

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be used by State, Dis			i	FOR LINE 30a OF FORM 3
ME OF COMMITTEE (In Full)				
A. Full Name (Last, First, Mid	ddle Initial) / Full Org	anization Name	🗌 Memo Item	Type of Allocated Activity or Event: Voter Registration GOTV Voter ID Generic Campai
Mailing Address		<u> </u>		Allocated Activity or Event Year-To-Date
City	State	Zip Code		
Purpose of Disbursement			Category/ Type	
FEDERAL SH	IARE +		N SHARE	= TOTAL AMOUNT
		<u> </u>		Type of Allocated Activity or Event:
B. Full Name (Last, First, Min	ddle Initial) / Full Org	anization Name	[_] Memo Item	Voter ID Generic Campai
Mailing Address				Allocated Activity or Event Year-To-Date
City	State	Zip Code		
Purpose of Disbursement	<u></u> <u>_</u>	<u> </u>	Category/ Type	Date
FEDERAL SH	IARE +	LEVI	N SHARE	= TOTAL AMOUNT
C. Full Name (Last, First, Mi	ddle Initial) / Full Org	anization Name	Memo Item	Type of Allocated Activity or Event: Voter Registration GOTV Voter ID Generic Campa
Mailing Address	<u></u>			Allocated Activity or Event Year-To-Date
City	State	Zip Code		
Purpose of Disbursement	L		Category/ Type	Date
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BTOTAL of Shared Federal a FEDERAL SH	•	•	N SHARE	= TOTAL AMOUNT
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FEDERAL SH	ARE +	LEVIN oral share to 30(a)(27 <u>5</u>	

FEC Schedule H6 (Form 3X) Rev. 05/2016

SCHEDULE L (FEC Form 3X) AGGREGATION PAGE: LEVIN FUNDS

NAM	E OF COMMITTEE (In Full)		
NAM	E OF ACCOUNT		
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	(Add Lines 1c and 2)	· · · · · · · · · · · · · · · · · · ·	
4.	TRANSFERS TO FEDERAL OR ALLOCATION ACCOUNT (Use Schedule L-B)		
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	(b) Voter ID	· · · · · · · · · · · · · · · · · · ·	
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	(c) GOTV		
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		<u>· · · · · · · · · · · · · · · · · · · </u>	

SCHEDULE L-A (FEC Form 3X) ITEMIZED RECEIPTS OF LEVIN FUNDS

Use separate schedule(s) for each category of the Aggregation Page

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PAGE FOR LINE NUMBER:

(check only one)

OF

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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

>	E OF COMMITTEE (In Full)			
Full I	Name of Individual (Last, First, Middle Initial) or Ful	Date of Receipt		
Mailir	ng Address			
City	· · · · · · · · · · · · · · · · · · ·	State	Zip Code	Amount of Each Receipt this Period
Nam	e of Employer (for Individual)	Aggregate Year-to-Date		
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FEC Schedule L-A (Form 3X) Rev. 05/2016

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